

Testimony of

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Before the

Senate Finance Committee

on

Elder Justice: Protecting Seniors from Abuse and Neglect

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Mr. Chairman and Members of the Committee:

Thank you for inviting me to speak at this hearing. My name is Joanne Otto. I am the Executive Director of the National Association of Adult Protective Services Administrators. Our organization represents Adult Protective Services professionals in every state, the District of Columbia and Guam. These are the professionals who are the first responders to more than 500,000 reports of abuse, exploitation and neglect of elderly and vulnerable adults every year.

Adult Protective Services staff takes these reports and makes face-to-face contacts with victims in order to evaluate the types and severity of abuse, the physical and mental status of the victims, as well as the likelihood of future abuse.

These workers also collaborate with a multitude of other professionals including law enforcement; prosecutors; physicians; nurses; emergency medical technicians; hospital staff; home health agencies; financial institutions; senior centers and mental health care providers. The purpose of these collaborative efforts is to put in place the most appropriate and comprehensive assortment of services to assure the victim's safety and well-being.

Abuse of elderly and vulnerable adults occurs to victims in every state; in cities and rural areas; to the rich, the poor and those in between; to people of all racial and cultural backgrounds. It happens in our communities, and to our family members.

Recently, not far from where I live, a 51 year old man shot his parents as they were frantically calling for help. He killed them because they would not give him the deed to their farm.

My own mother-in-law had been a nursing home administrator for many years. When she finally lived in a nursing home as a patient at the age of 87, her favorite ring was pried from her fingers while she slept. It was written off as "lost" and no report was filed with the police.

Abuse includes the elderly man who was beaten and set on fire by his son; the 96 year old blind woman who was raped by her paid caregiver; the 72 year old resident of a board and care home who weighed 60 pounds and had 30 bedsores, some of them to the bone.

Neglect, includes the man who subsisted on a diet of canned cake frosting and the woman living in a trash filled house with 47 cats. Each case is unique, and each one requires time, expertise and a wide variety of responses and resources.

Because there have been no Federal laws relating to the delivery of adult protective services, each state has passed separate legislation with different definitions, eligibility requirements and administrative structures. Most states provide protection services to all impaired adults age 18 and older; some define "elderly" as 60 and older while others use 65 and older. Adult protective services may be administered by aging services, social services or private contractors. Most telephone directories do not have a listing for "elder abuse" or "adult protective services." All of these variables make it difficult to know where to report the abuse or where to get help.

Funding for adult protective services also varies from state to state. It usually is made up of a mixture of funds including the Social Services Block Grant (16%); Older American Act (1%); local money (3%) and other funds such as medicaid (19%).

Colorado, Michigan, Mississippi and the District of Columbia rely exclusively on the Social Services Block Grant which has been severely reduced in recent years. Louisiana and Hawaii are totally state funded, with state general funds making up 61% of all the states monies for Adult Protective Services. The recent down-turn in the economy has resulted in freezes and reductions of adult protective service staff, cutbacks on travel and training, as well as the adoption of waiting lists for abuse investigations. These reductions put victims in increased danger of additional and more serious abuse.

In addition to staff shortages, states have identified the following gaps in services for abused elderly and vulnerable adults:

- ▶ Lack of training for Adult Protection, law enforcement and prosecutors
- ▶ Lack of emergency temporary housing and in-home care for abuse victims
- ▶ Lack of coordination between federal, state and local agencies
- ▶ Lack of reliable national and state data
- ▶ Lack of public awareness about abuse of elderly and vulnerable adults
- ▶ Lack of protective services for disabled, people under the age of 60
- ▶ Lack of responsible guardians to act on behalf of victims who lack the capacity to manage their own affairs

What we need now to combat elder and vulnerable and adult abuse:

- ▶ Specific federal funds for adult protective services staff
- ▶ An office in a federal agency to provide a national home for adult protective services
- ▶ Funds for training adult protective services, law enforcement, prosecutors, and other relevant professionals
- ▶ Uniform automated data collection at the state and national level
- ▶ A national public awareness campaign
- ▶ Better coordination and cooperation among federal, state and local agencies
- ▶ Improved training and best practice models
- ▶ Funding for the development of emerging shelters and in-house support services

With half a million abuse reports a year, and an additional two to three million incidents which occur but never are reported, the abuse of elderly and vulnerable adults has reached epidemic proportions.

Hearings such as this one, and legislation initiatives such as the proposed Elder Justice Act of 2002, are helping to finally move things forward. I have often said that I did not think I would see the enactment of this type of federal legislation in my lifetime. For the sake of all of us who are growing older, I hope I am wrong.

ATTACHMENTS TO JOANNE OTTO'S TESTIMONY

Attachment A: Adult Protection Case Examples (p-1)

Attachment B: NAAPSA STATES' APS REPORTS AND EXPENDITURES 2001 (p-2)

Attachment C: Adult Protective Services NAAPSA (pp 3-4)

Attachment E: NAAPSA Ethical Principles and Best practices Guidelines (p 5)